

for their new government-run health care program and they think insurers in the program are overpaid by 14 percent. Tell that to the 25 percent of seniors who are enrolled in the program nationwide. I guess they weren't included in the folks who can "keep their plan if they like it."

Perhaps the Democrats didn't look at the plus side of Medicare Advantage. Studies show that those in the program spend fewer days in the hospital and experience fewer readmissions. A study in California showed that those enrolled in Advantage plans spent 30 percent fewer days in the hospital and were 15 percent less likely to be readmitted to the hospital. I would say that accounts for a huge savings.

The Congressional Budget Office also says the Democrats' health care plan would increase seniors' Medicare prescription drug premiums by 20 percent over the next decade. I thought reform was supposed to be improvements, not a plan to soak our seniors.

HEALTH CARE

(Mr. JOHNSON of Georgia asked and was given permission to address the House for 1 minute.)

Mr. JOHNSON of Georgia. Mr. Speaker, the men and women of this great Nation are not stupid, even though there have been strident, permanent and significant efforts to mislead them; that reached its heyday in August. But now we're talking about a public option because the people are speaking now.

And so I want to salute the American people; you want affordable health care, which means you are sick and tired of the rise in premiums, the cost of premiums and the number of denials that you are getting after dutifully paying those premiums for years and years. So I want to congratulate the American people; you are about to have a victory with respect to health care.

PUBLIC OPTION TRIGGER

(Mr. CONAWAY asked and was given permission to address the House for 1 minute and to revise and extend his remarks.)

Mr. CONAWAY. Mr. Speaker, frustrated this summer by diligent and watchful Americans, the President, the Speaker and the Senate Majority Leader have been unable to create a single-payer health plan, the single largest expansion in the cost, size and authority of the Federal Government in 70 years. But rather than give up, the Democrat leadership have decided to float an idea as a misdirection play to get what they want. They call it a trigger; I call it a wolf in sheep's clothing.

While some might argue that a trigger would lower health care costs, Americans are awake and watching and they know better. They see this wolf and realize that a trigger paves the road toward government control of

health care and the loss of individual choice of health care decisions.

On this Halloween week, I urge the Speaker to take off the mask of reform and focus on health care solutions that don't include the government takeover of health care. The American people deserve honesty in this debate and won't be scared into supporting a trigger.

HEALTH CARE

(Mr. LUJÁN asked and was given permission to address the House for 1 minute and to revise and extend his remarks.)

Mr. LUJÁN. Mr. Speaker, our constituents have asked us to put them first, not say no and support the status quo. I ask my colleagues from the other side, from both sides, to listen to them and help them.

I have a constituent who has had health problems since she was 21, who has spent her life shackled by high copays, inaccessible insurance, and little care, and is asking us to help her. She has endured through two bankruptcies and many undertreated health problems that cause her pain every day.

Another constituent is facing increases of 20 percent each year in premiums for her business. Each year, these insurance costs are skyrocketing, and neither she nor her employees can afford them.

Throughout the country, the American people are asking us to help, but we keep hearing "no"—"no" to those with illnesses and "no" to those who struggle with the high cost of health care.

Let us do what's right. Let's come together. Let's have the courage to say yes for the American people.

HEALTH CARE

(Mr. FRELINGHUYSEN asked and was given permission to address the House for 1 minute.)

Mr. FRELINGHUYSEN. Mr. Speaker, as the House majority debates with itself in secret on the future of health care, the American people are justified and worried about what is being discussed behind those closed doors.

As I always do, I have spent months listening to seniors across my district, and they are particularly concerned about how so-called "reform" will affect their Medicare and the medical care on which they rely every day.

Let me tell you, they are wise. They know that the so-called "Medicare savings" that are proposed to pay for the Speaker's \$1 trillion reform bill sounds an awful lot like Medicare cuts to them. In fact, there are \$500 billion in cuts to Medicare over 10 years in the bill, cuts that affect them, the doctors that treat them, and the hospitals who care for them.

Specifically, the majority plans to slash the Medicare Advantage program by more than \$120 billion. Experts believe that nearly 3 million seniors will

be thrown off Medicare Advantage and millions more will pay out-of-pocket expenses or face reduced benefits. We can't let this happen.

OPTING OUT OF THE GOVERNMENT TAKEOVER

(Mr. PRICE of Georgia asked and was given permission to address the House for 1 minute.)

Mr. PRICE of Georgia. Mr. Speaker, yesterday we learned an interesting thing: the Senate health care bill will include a fig leaf opt-out of the government-run health care plan. Now, that brings up some interesting points and questions: Will Americans also be allowed to opt out of the rest of the government takeover of health care? Will they be able to opt out of the \$800 billion in tax increases? Will they be able to opt out of the \$500 billion in slashes to Medicare? Will they be able to opt out of forcing millions of Americans onto government-run medicine? Will they be able to opt out of a government bureaucrat getting between doctors and patients? The truth is, Mr. Speaker, anyone who seriously thinks an opt-out is the answer to all of these harmful provisions has already opted out of reality.

What the American people know is that there are positive solutions like H.R. 3400 and the others included from the Republican Study Committee and the Republican Conference. The American people want patients empowered and they want positive reforms. That's what we should be working on.

HEALTH CARE

(Mr. MORAN of Virginia asked and was given permission to address the House for 1 minute and to revise and extend his remarks.)

Mr. MORAN of Virginia. Mr. Speaker, it's nice to see our colleagues on the other side of the aisle engaged in the health care issue. Unfortunately, it's in a negative manner again with no positive recommendations for us to move forward.

You know, this is what happened back in the 1990s when we tried health care reform; there was unanimous Republican opposition to that effort. And, of course, during the 8 years of the Bush administration, we had no effort to deal with a health care plan.

So now where do we stand? Well, back in the 1990s, the average family paid about \$7,000 to \$9,000 for a family policy; today, they're paying \$12,000 to \$14,000. We know that within another decade, if we don't do something today, they're going to be paying \$29,000 to \$36,000 for a family health policy. Now, that might be okay if we were healthier as a result, but out of 110 countries surveyed, we are 72nd. Seventy-one countries are healthier than we are.

Our health care system isn't working. It's too expensive, we're not getting what we're paying for, and it's got to change. Now!

COMMONSENSE HEALTH CARE
REFORM

(Mr. FORTENBERRY asked and was given permission to address the House for 1 minute and to revise and extend his remarks.)

Mr. FORTENBERRY. Mr. Speaker, Terry recently wrote me, "Congressman, I can buy a car in Iowa, beer in Kansas, a fishing license in South Dakota, land in Colorado, but health insurance? No place but Nebraska."

Mr. Speaker, in these difficult times people are hurting. Families, and especially seniors, need more affordable options, from what they put on their table to what they put in their medicine cabinets.

My constituent, Terry, pointed out a commonsense reform—purchasing health insurance across State lines. There are other reforms, such as appropriately addressing preexisting conditions, promoting a culture of health and wellness to drive down costs, creating new insurance risk pool models for small businesses and families, strengthening community health centers, and expanding opportunities for health savings accounts. These changes could mark a truly bipartisan policy effort that increases competition among health insurance companies and benefits all Americans.

REFORM HEALTH CARE NOW

(Mr. TIM MURPHY of Pennsylvania asked and was given permission to address the House for 1 minute.)

Mr. TIM MURPHY of Pennsylvania. Mr. Speaker, the President said our health care is too costly. I agree. But the Democrat plan doesn't reform or eliminate the \$1 trillion in waste, so you will pay more—not just your children or your grandchildren, but you. How? Their plan has a wheelchair tax, a hospital bed tax, asthma device tax, artificial hip tax. Diabetes supplies, medicines, home oxygen equipment, all taxed. Have a heart attack? There's taxes on heart monitors, heart valves and pacemakers. How about health insurance? They tax you if you have it and tax you if you don't. Employer paid insurance? They tax them if they will and they tax them if they won't. States can opt out of the government-run plan, but you still have to pay the taxes. It's taxation without hospitalization.

Let's reform Medicare, reform Medicaid, reform health care, cut the waste, improve quality, let people buy across State lines, join groups, make insurance personal, portable, permanent. Millions of Americans are begging us to fix the problems, not finance them. Millions of Americans can't all be wrong.

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HEALTH CARE

(Mr. WILSON of Ohio asked and was given permission to address the House for 1 minute.)

Mr. WILSON of Ohio. Mr. Speaker, I rise today in support of liability reform.

I have heard from people all across my district in Ohio about how much they need health insurance reform. I have heard from Dawn, a small business owner who has a story that is truly heartbreaking.

Due to a doctor's mistake when her son was 23 days old, Dawn's son was left with lifelong brain damage. For the past 10 years, she and her husband have struggled to find insurance for her son. When no insurance would cover him, they were forced to pay out of pocket for all of his doctors' appointments, physical therapy, and they are currently living at the poverty level. Between the two of them, they have held as many as five jobs to try to cover their son's medical expenses.

Last year, in my district in Ohio, there were 1,270 health care-related bankruptcies. Without comprehensive health care insurance reform, Dawn's family could be the next one.

We are at a breaking point. We must come together and bring security and stability to our health care system for families like Dawn's and for everyone else in this country.

HEALTH CARE

(Mr. WHITFIELD asked and was given permission to address the House for 1 minute.)

Mr. WHITFIELD. Mr. Speaker, there are many provisions of the Democratic health care bill that we support, like taking care of the preexisting condition problem.

But we also oppose cutting Medicare by \$500 billion over 10 years. We oppose taking \$155 billion out of the hospital account. We oppose reducing Medicare Advantage by \$123 billion. We oppose taxing, putting a surtax on small business men and women, thousands of them. We oppose individuals being penalized 2.5 percent of their gross income if they do not buy a policy. We oppose requiring employers to pay 8 percent of the gross wages of their employees if they do not provide insurance. Then, after all of that, there still is \$200 billion needed to pay for this expensive health care bill.

Those on this side of the aisle are willing to work with the other side of the aisle if they would simply open the door and give us the opportunity.

HEALTH CARE

(Mr. PALLONE asked and was given permission to address the House for 1 minute.)

Mr. PALLONE. Mr. Speaker, I respect a great deal my colleague from Kentucky who is on the Energy and Commerce Committee, but I heard him mostly talk about what he opposes.

That's the problem with the Republican mantra on health care reform. They are opposed to so many things, but we really don't know what they are

supportive of. The fact of the matter is from the very beginning we tried to include both sides of the aisle on this health care reform, but essentially what we heard from the Republican side was they didn't like this, they didn't like that, and, ultimately, they didn't like anything.

Now we are forced, I suppose, to bring a bill to the floor which probably will get mostly or maybe only Democratic support, but it will cover everyone. It will provide that universal health care that has been so lacking with so many people now who can't find health insurance or find it increasingly unaffordable. The public option is a very important part of that, because basically it will create competition and bring down costs for the average American.

We are moving forward now. We would like to have bipartisan support. But if we don't, we are still moving forward, because we know that the promise of health care for every American is really crucial.

PROTECTING AMERICAN SENIORS

(Mrs. MILLER of Michigan asked and was given permission to address the House for 1 minute and to revise and extend her remarks.)

Mrs. MILLER of Michigan. Mr. Speaker, as Democratic leaders retreat behind closed doors to craft their government takeover of health care, American seniors are rightly concerned about what \$500 billion in cuts in Medicare will mean to them.

Throughout this process, Democrats have made clear that they intend to force American seniors to carry a large share of the cost of reform, and this includes eliminating Medicare Advantage. Democrats understand how negative the reaction will be when seniors learn that they are scrapping this program, so they have placed a gag order on companies that provide this coverage, stopping them from communicating with seniors on the ramifications of this change.

That's right, the Democrats who promised transparency and accountability have gone behind closed doors to craft legislation and have used the power of government to stop dissenters from communicating with American seniors. Well, American seniors are right to be concerned.

With the job-killing tax increases the Democrats are also talking about, American workers need to be concerned as well, Mr. Speaker. Perhaps that is why the Democrat majority will not allow us to have 72 hours to read the bill before it's voted on.

HEALTH CARE

(Mr. ROSKAM asked and was given permission to address the House for 1 minute and to revise and extend his remarks.)

Mr. ROSKAM. Mr. Speaker, if you are from the northwest suburbs of Chicago, today you woke up and you